



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

STATE OF HAWAII
ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
CHAR	Susan	M.	532-5865
MAILING ADDRESS (Street)			FAX
P. O. Box 2750			532-5864
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96840-0001	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)			(State)
(Zip Code)			

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Maui Electric Company, Limited	871-2302
MAILING ADDRESS (Street)	FAX
P. O. Box 398	871-2350
(City)	(State)
Kahului	Hawaii
(Zip Code)	96733-6898
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Marcia Wright	532-5860
MAILING ADDRESS (Street)	FAX
P. O. Box 2750	532-5864
(City)	(State)
Honolulu	Hawaii
(Zip Code)	96840-0001

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	XX Science, Technology & Economic Development
XX Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
XX Consumer Protection & Commerce	Hawaiian Affairs	XX Labor & Employment	XX Transportation
Culture, Arts, Historic Preservation	Health	XX Planning, Land & Water Use Management	Other: (indicate below)
XX Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

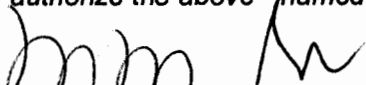


(Signature of Lobbyist)

1/24/05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Molly M. Egged		Secretary	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Maui Electric Company, Limited		543-7728	
MAILING ADDRESS (Street)		FAX	
P. O. Box 2750		543-7523	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96840-0001	
<i>I hereby authorize the above -named person to engage in lobbying activities on behalf of the undersigned.</i>			
		1/31/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	